## DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH

## RFA# CHA MCHS080715

Title V - Maternal and Child Health Services

## **Frequently Asked Questions**

- **Q. 1** The word domain seems to be used in two different ways on two different lists. Please explain how to match them up?
- **A. 1** The Health Resources and Services Administration (HRSA) defined 6 health population Domains for FY2016-2020 that Title V Programs should use as a focus area which are listed on pg. 12 of the RFA. Under each domain, there is a performance area (measure) listed on pg. 15-21 of the RFA. The intention of domain is to cover those 6 areas that we are tasked to address through Title V funding. See the chart below.

HEALTH POPULATION DOMAIN	PERFORMANCE AREA
DOMAIN 1 – Women/Maternal Health	Well-woman visits / Tobacco
DOMIAN 2 - Perinatal Infant Health	Breastfeeding
DOMAIN 3 – Child Health	Behavioral Health / Tobacco
DOMAIN 4 – Adolescent Health	Youth Violence / Behavioral Health
DOMAIN 5 - CYSHCN	Transition and Navigation
DOMAIN 6- Cross-cutting or Life Course	Tobacco

- **Q. 2** Did the performance areas come from the DC Title V Needs Assessment?
- **A. 2** Yes. The performance areas are a combination of the HRSA national performance measures and the Districts Title V needs assessment. The needs assessment outlined the Title V priority areas which the Community Health Administration (CHA) aligned with the national performance measures.
- **Q. 3** Can you point out which of the metrics or which of the outcomes on page 33 correspond to your behavioral health performance area?
- **A. 3** When CHA went into the adolescent domain there was a performance measure about the selection of a medical home and that all adolescents with and without special health care needs should have a medical home. There was another selection about transitional services. The thought process was that it is impossible to have the transition services without the medical home so that we are addressing both underlinely. There was a strong voice from the stakeholders that was included in the needs assessments that behavioral health is a huge issue among our population, especially in the adolescent phase. Overall the behavioral health ties into the overall health and well-being of adolescents by linking them to a medical home and then providing transitional services.

- **Q. 4** Are current DOH grantees for this service area eligible to apply for this funding if they are already funded to provide services for similar target populations?
- **A. 4** Applicants are eligible to apply under D. Eligible Organizations/Entities on pg.9 on the RFA. To fulfil the requirements of the performance areas, applicants must be able to administer services in the priority setting or link services to the listed priority settings.
- Q. 5 Is there any information on how behavioral health would be taken into account or scored?
- **A. 5** The evaluation criteria is listed in section VI. Evaluation Criteria which is on pg. 23.
- **Q. 6** Can we submit an application for Transition and Navigation or should the applications be submitted separately, one for Transition and one for Navigation?
- **A. 6** A separate application needs to be submitted for each performance area; however, since the RFA lists both transition and navigator measures together, DOH will accept just one application specifically for those two measures. This is the ONLY exception.
- **Q. 7** Can you clarify if the transition performance area is for youth with special health care needs or for youths without special needs?
- **A. 7** The transition performance area is for adolescents with and without special health care needs per HRSA.
- **Q. 8** If you have an institution that has more than one unit submitting an application is it true that you can only accept one application per institution?
- **A. 8** A separate application should be submitted for each performance area. Please refer to pg. 12, B. Purpose, #2 of the RFA and pg. 25, Application Package.
- **Q. 9** So just to clarify each institution can submit more than one application but only one per performance.
- **A.9** Yes.
- **Q. 10** Do you have a page limit recommendation for the narrative?
- **A. 10** The total page limit including attachments is 80. Refer to pg. 27 of the RFA under Format.
- **Q. 11** I saw oral health listed maybe once or twice is that a priority?
- **A. 11** Not for this RFA.
- **Q. 12** I cannot find section VI F-application elements which is referenced on pg. 25 by Project Narrative and Attachments and I don't see a request for organizational budget and audits?

- **A. 12** Yes that is in the application on pg. 14 under audits. That is a standard template language.
- **Q. 13** Do we have to attach an audit because that is not in the list of attachments?
- **A. 13** You don't have to include them in your application you just have to have one. Some of the documents that we request you don't have to include them in your application; however, if you are funded then some of the documents we do request and will ask for prior to your receipt of an award or post-award.
- **Q. 14** Do you want a one year work plan?
- **A. 14** Yes. An annual work plan is required.
- **Q. 15** Will you allow for any start up time for the project?
- **A. 15** The start-up of program activities, whether planning, development, setting up operations would depend on the program design and operational capacity. Funds would be available as soon as an award is issued.
- **Q. 16** When do anticipate the awards to start?
- **A. 16** October 1, 2015 is the anticipated start date; however, this date is subject the change if needed.
- **Q. 17** You talk a lot in here about Plan Do Study Act (PDSA), is that something you are expecting us to do on an annual cycle or is that something we can spread out on the course of multiple years in terms of just general expectations?
- **A. 17** Every project would not need a monthly PDSA, and that is something that can be worked out in the award phase. If you are approved for funding, then we look over what the work plan is and we see where that would best fit and how it can benefit your program and your participant.
- **Q. 18** On the application it says that you need 1 original and 1 copy and then on another part it says 1 original and 4 copies is there an mistake on the application?
- **A. 18** You will need 1 original and 3 copies for a total of 4 copies, and a thumb drive.
- **Q. 19** Where do we identify the administrative fees?
- **A. 19** On the budget template, because normally its IDCR that will be where you would put your administrative cost and it is 10% of your direct cost, so just don't exceed 10% of your direct cost.
- **Q. 20** Is there a percent to use an amount to sub contract another institution services under the contract?
- **A.20** As long as it makes sense in the program. Please understand that the same conditions apply to any sub contract that you have and the same conditions that are in this RFA apply to the sub contracts itself. The same thing applies with the 10% in direct costs mentioned in the answer for questions # 25.

- **Q. 21** Will the department be looking to fund programs in all of the priority areas or just whatever is the strongest?
- **A. 21** We would like to fund programs in all priority area but they will be reviewed based on the strength of the application, so if in a certain category there are no strong applications then there won't be any awards made.
- **Q. 22** The list on page 27 is it in addition to the resumes and job descriptions and certifications and insurances and so forth?
- **A. 22** Yes it's in addition to resumes and job descriptions. Please refer to number 5 on pg. 226-27 of the RFA.
- **Q. 23** Can you clarify more about the Life Course Health Development process (Life Course Domain)?
- **A. 23** Please visit the HRSA link

http://mchb.hrsa.gov/lifecourse/

- **Q. 24** Can you provide more information the on the PDSA cycle?
- **A. 24** Plan Do Study Act is a model for improvement. Additional information can be found on the HRSA at website at

http://www.hrsa.gov/quality/toolbox/methodology/testingforimprovement/part2.html

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